PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| | | Effe | ective Decen | nber 8, 200 | 04 | | 10/ | 5 | 18398 | / |
|--|--|---|---------------------|---|------------------|-------------------|------------------------|--------|---------------------|------------------------|
| | | CLAIMS A | S FILED - P | ART I | | SMALL | ENITITY | OR' | LARGE E | NITITY |
| | | | (Colun | nn 1) | (Column 2) | 3 Sinace | CHIIII |) 1 | - CANGE E | 1 |
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | | | | BASIC FEE | 150 | OR | BASIC FEE | |
| EXAMINATION FEE | | | | | | EXAM. FEE | 100 | | EXAM. FEE | |
| SEARCH FEE | | | | | | SEARCH FEE | 200 | | SEARCH FEE | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 5 minu | s 20 = | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | min | us 3 = | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PRE | SENT | | <u> </u> | + \$ 180 = | 1.44 | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | 451 | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SMALL | ENTITY | OR | OTHER I | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus ` | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | . : | TOTAL ADDI FEE | г. | OR | TOTAL ADDIT. FEE | |
| | | (Column 1) | | | (Column 3) | | | - | | t. |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus 🚤 | ## | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT | | | | ¹ . 🔲 | + \$ 180 = | | .OR | + \$ 360 = | |
| | | | | | | TOTAL ADDI FEE | Т. | OR | TOTAL ADDIT. FEE | |
| | | | | | | | | | • • • • | |
| | | 4 to loce there the | a antar la column 3 | unito MON in colum | mn 3 | • | d. | | | |

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter."20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.